

Wisconsin Department of Corrections

Governor Scott Walker | Secretary Jon E. Litscher

February 23, 2018

Sheriff Jeff Rickaby Florence County Sheriff's Department 501 Lake Avenue Florence, WI 54121-0678

RE: 2017 Jail Inspection

Dear Sheriff Rickaby:

Pursuant to Wisconsin Statute §301.37(3), an inspection of the Florence County Jail was conducted on December 13, 2017. The inspection compared the facility to the Department of Corrections Administrative Code Chapter DOC 350, applicable state statutes, and correctional best practices. The process included a review of records, dialogue with staff and inmates, and a walkthrough of the facility to assess the safety, sanitation, adequacy, and fitness of the facility. This correspondence will summarize the findings of the inspection.

PHYSICAL ENVIRONMENT

The Florence County Jail consists of a podular remote design.

The facility has a

maximum rated capacity of 28 adult inmates, and this was verified on the date of the inspection. The Florence County Jail is approved by the Department of Corrections for the temporary detention of juvenile offenders in the juvenile portion of the county jail. There were 10 inmates at the jail on the date of the inspection.

Podular Section: #210 – 4 single cells, #218 – 4 double cells (8 beds), #220 – dormitory 6 beds, #223 – dormitory 4 beds, #226 – dormitory 4 beds, #233 – 1 double cell (2 beds)

Total = 28 beds

INMATE RESOURCES

- **Support Groups** AA and NA.
- Religious Services Bible study.
- Visitation Visitation is conducted twice a week; 15 minute non-contact visits.
- Commissary Canteen can be ordered weekly by eligible inmates.

- Recreation Recreation is limited to dayroom activities; at times #212 the multipurpose room is utilized for recreation.
- Reading Materials Inmates are afforded access to reading materials weekly.
- **Schooling** GED classes are provided through Northwest Technical College. Inmates may also take college courses upon approval at their own expense.

INPROVEMENTS/CHANGES SINCE THE 2016 INSPECTION

- A corporal position has been approved in the 2018 budget.
- · Replaced ceiling tiles which were damaged from water leakage.
- Walls and brown trim were repainted in Dorm 210; work was done by an inmate.

CURRENT GOALS AND INITIATIVES

- The implementation of new records management software and 911 software through Zuercher Technologies.
- Just hired a part-time female corrections officer; she is set to go to the jail academy in February 2018.
- A review and modification of the jail rules is anticipated to be completed prior to the next inspection.

SUMMARY OF FACILITY OPERATIONS

The annual jail inspection consisted of meeting with Florence County administrative staff, security staff and healthcare personnel. The site visit included a review of records, dialogue with staff and inmates and a walkthrough of the jail to assess the safety, sanitation, adequacy and fitness of the facility.

Safety inspections and procedures continue to be completed as required: daily, weekly, monthly and annually. Cell searches are completed by jail staff, and all searches are logged and kept in a binder. Correctional Officer Her demonstrated proficiency when applying a SCBA unit.

INSPECTION SUMMARY

The following items are in need of attention to ensure the facility is clean and in a healthful condition as outlined in Wisconsin Statute §302.37: The sheriff or other keeper of a jail shall constantly keep it clean and in a healthful condition and pay strict attention to the personal cleanliness of the prisoners and shall cause the clothing of each prisoner to be properly laundered.

• #220, #223, #226: On the day of the inspection the showers were found to be dirty and in need of a good cleaning. Recommend setting up a routine cleaning schedule for shower/bathroom areas.

Overall, the physical condition of the facility is well maintained and kept in sanitary condition.

VIOLATIONS OF ADMINISTRATIVE RULE

No violations were found on the day of the inspection.

JUVENILE CODE REVIEW - DOC Chapter 346

The Florence County Jail is approved by the Department of Corrections for the temporary detention of juvenile offenders in the juvenile portion of the county jail. Maintaining compliance with applicable administrative codes, state statutes, and the federal Juvenile Justice and Delinquency Prevention Act (JJDPA) is required.

No juveniles were held in this facility during this inspection period. Juvenile files are maintained separately from adult files as required; this also includes juvenile medical files separate from adult medical files. Juvenile observations are completed every as required. Sight and sound requirements are maintained as well. Monthly data collection records are forwarded to the Department of Justice, Training and Standards Bureau, Juvenile Justice Programs as required.

RECOMMENDATIONS

- Routinely review stock medication flow sheets to ensure jail staff are properly documenting the delivery of medication to inmates.
- Set up a routine cleaning schedule for the housing unit showers and monitor.

STATEMENT OF APPROVAL

The Florence County Jail is approved by the Department of Corrections for the secure detention of adult offenders with the maximum capacity of 28. This approval is contingent on the continued compliance with all applicable state statutes and administrative codes.

If you have any questions regarding the inspection results summarized in this letter and found in the inspection worksheet attached or if I may be of any assistance regarding correctional matters, please contact me.

I wish to thank you, Sheriff Rickaby, and Jail Administrator Valine and the jail officers on duty on the day of the inspection for the assistance provided during the inspection. I appreciate all of your efforts preparing for the inspection. Jail Administrator Valine is recognized for the detailed assembly of documents requested prior to my arrival. Thank you.

Sincerely,

Heidi Mellenberger

Detention Facilities Specialist

cc: Roger Valine, Jail Administrator Kristi Dietz, Director of ODF File

Enclosure-Inspection Worksheet

CHAPTER DOC 350 INSPECTION DOCUMENT

COUNTY:	Florence		D	ATE	i: 12/13/2017
	IN	IM.	ATE HOUSING AND CLASSIFICATIO	N	
DOC 350.05	(3) (d) In jails that are construct	ed	or substantially remodeled on or after Septe	embe	er 1, 2014, double cells shall have a
floor area of	at least 25 square feet of unenc	um	bered space per occupant.		
COMPLIANC	CE \	/EF	RIFICATION		
Me	eets standard		Policy and procedure manual review	P	revious compliance documented
☐ Ne	eeds improvement		Sample of facility records reviewed] 0	ther (specify):
☐ No	on-compliant		Sight confirmation by inspector		
⊠ No	ot reviewed		Verbal confirmation by facility staff		
Comments:	N/A				
DOO 050 00	(a) (l) Doo of of (4) Letelle				
			are constructed or substantially remodeled of at least 70 square feet. NOTE: ODF reco		
			990, a cell shall have a floor area of at least (
COMPLIANC	CF \	/FF	RIFICATION		
	eets standard	П	Policy and procedure manual review	7 P	revious compliance documented
=	eeds improvement	Ħ	Sample of facility records reviewed	=	ther (specify):
	on-compliant		Sight confirmation by inspector		and (openly).
	ot reviewed		Verbal confirmation by facility staff		
		امد	ated in housing unit #218 (four double	والم	s) and unit #232 (one double cell)
Comments.	bouble occupancy cells are	100	ated in flousing drift #210 (four double	CCIIC	s) and unit #202 (one double cen).
DOC 350 30	Dauble calling If approved by	416	department the icil shall have policies and		
			e department, the jail shall have policies and	-	
			hall determine jointly the adequate staffing n		
			d security of the jail staff and inmates when ed by the representatives of the county board		
department.	The written joint determination	sh	all remain in effect until rescinded or amend	ed b	y mutual written agreement of the
	d and sheriff. Unless there is ac	leq	uate staff as agreed upon by the county boa	rd ar	nd sheriff, double celling may not
occur.					
The written	agreement between the County	Boa	ard and Sheriff is on file with the department	and	contains the following elements:
The	County Board and Sheriff agree to	th	e stated staffing levels		_
			ealth care staff, support and service staff and a	ıdmin	istrative staff
	staffing pattern is detailed in the w		en agreement es of the County Board and the Sheriff		
- 1116	agreement is signed by represent	aliv	es of the County Board and the Orient		
COMPLIANC	CE \	/EF	RIFICATION		
∑ Me	eets standard	\boxtimes	Policy and procedure manual review	P	revious compliance documented
☐ Ne	eeds improvement	$\overline{\boxtimes}$	Sample of facility records reviewed] 0	ther (specify):
☐ No	on-compliant		Sight confirmation by inspector		
☐ No	ot reviewed		Verbal confirmation by facility staff		
Comments:	Staffing agreement on file da	ate	d November 5, 2009.		
	gg				

DOC-2744 (4/2015) DOC 350.20 (2) Inmates housed in the same cell shall have the same custody classification and be properly segregated as required under s. 302.36, Stats. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #006. On the day of the inspection there were 10 inmates in custody. All 10 inmates were properly classified and segregated. DOC 350.20 (3) For male and female housing areas, at least one cell or 15% of the jail's total number of cells, whichever is greater, shall be maintained for single occupancy. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: Policy #006. DOC 350.20 (4) Receiving cells may not be used for double occupancy. VERIFICATION **COMPLIANCE** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #006. Receiving cells are used for single occupancy only. DOC 350.21 Inmate classification. All jails shall meet the requirements set forth in s. 302.36 Stats. The sheriff shall establish and maintain an objective prisoner classification system to determine prisoner custody status and housing assignment, and develop eligibility criteria for prisoner participation in available work assignments, programs and community service projects. The jail shall have policies and procedures relating to classification. DOC 350.21 (1) Description of the objective prisoner classification system, including the identification and training of staff authorized to classify prisoners, initial classification and reclassification procedures and prisoner appeal process. DOC 350.21 (2) Eligibility criteria for prisoner participation in available work assignments, programs and community service projects. DOC 350.21 (3) Review of prisoner classification decisions. The jail has implemented an objective classification system based on point additive formula or decision tree forced choice or similar formalized mechanism for housing determination. A written policy is provided to all correctional staff detailing classification process. Policy clearly identifies personnel authorized to classify inmate housing assignments. Personnel assigned to complete inmate classification assignment receive formal training. A process is in place for supervising personnel to complete a secondary review of reclassification and appeals. Sufficient housing exists to meet classification guidelines to male and female inmates. Inmates housed in the same cell shall have the same security classification and be properly segregated as required in s. 302.36 Stats. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Verbal confirmation by facility staff Not reviewed Comments: Policy #006. The Northpointe decision tree is used to objectively classify inmates. A review of inmate records on the day of the inspection found that all inmates had been classified as required.

SAFETY AND SECURITY PRACTICES

DOC 350.18 Security. The jail shall have policies and procedures relating to jail security.

- Portable communications and alarm systems are in good working condition
- Intercom and emergency notification devices are in good working order

DOC 350.18 (1) Inmate supervision. The jail shall have a system providing for well-being checks of inmates. Policies and procedures shall provide that all inmates are personally observed by jail security staff at staggered intervals not to exceed the following:
(a) 60 minutes (b) 15 minutes for inmates housed on suicide watch.

- All inmates are personally observed during each physical inspection.
- In housing units of multiple cells, officers are encouraged to complete physical inspections from within the housing unit.

in nousing units of multiple cells, effects are effectively to complete physical inspections from within the nousing unit.					
DOC 350.18 (2) Supplemental observation. A video monitoring system may be used to supplement but not replace personal observations.					
DOC 350.18 (3) Documentation. Each obs					
COMPLIANCE	VERIFICATION				
Meets standard	Policy and procedure manual review	Previous compliance documented			
Needs improvement	Sample of facility records reviewed	Other (specify):			
Non-compliant	Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
Comments: Policy #004. Inmate obser	vations are completed and documented as	s required.			
DOC 350.18 (4) Inmate counts. Description	on of the system for physically counting inmates.	. Formal counts shall be completed and			
documented at least three times per day, v	vith a minimum of one count per shift.	·			
COMPLIANCE	VERIFICATION				
Meets standard	Policy and procedure manual review	Previous compliance documented			
Needs improvement	Sample of facility records reviewed	Other (specify):			
Non-compliant	Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
Comments: Policy #004. Inmate count	s are completed	and documented as required.			
DOC 350.18 (5) Security inspections. Des	criptions of procedures for conducting and doc	umenting facility and area searches.			
 Facility and area searches are comp 	eleted and documented.				
COMPLIANCE	VERIFICATION				
Meets standard	Policy and procedure manual review	Previous compliance documented			
Needs improvement	Sample of facility records reviewed	Other (specify):			
Non-compliant	Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
Comments: Policy #035. Facility and area searches are completed and documented as required.					
	<u> </u>	•			
DOC 350.18 (6) Inmate searches. Descriptions of procedures for conducting and documenting inmate pat down, strip and body cavity searches.					
COMPLIANCE	VERIFICATION				
Meets standard	Policy and procedure manual review	Previous compliance documented			
Needs improvement	Sample of facility records reviewed	Other (specify):			
Non-compliant	Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
Comments: Policies #017 and #018.					

Non-compliant

Not reviewed

Comments: Policy #004.

DOC-2744 (4/2015) DOC 350.18 (7) Door and lock inspections. Monthly inspections shall be made to determine if all jail doors and locks within and to the secure perimeter of the facility are in good working order. Each inspection shall be documented. The remote security controls of doors and locks are all operable. All manufacturing doors, locks and releases are repaired in a timely manner. The jail staff demonstrate a proficiency in operating all locks, doors and releases. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #035. Door and lock inspections are completed and documented as required. DOC 350.18 (8) Key control. Control and use of jail keys, including all of the following: All issued keys shall be inventoried and accounted for at shift change All keys shall be stored in a secure area and accessible in the event of an emergency Inmate are not permitted to handle or utilize jail keys. **VERIFICATION** COMPLIANCE Policy and procedure manual review Meets standard Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #026. DOC 350.18 (9) Weapons control. Introduction, availability, control, inventory, storage and use of firearms, chemical agents, electronic control devices or other related security devices and specification of the level of authority required for their access and use. **COMPLIANCE VERIFICATION** Policy and procedure manual review Previous compliance documented Meets standard Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policies #004, #005 and #016. DOC 350.18 (10) Tools and sharps control. Introduction, availability, control, inventory, storage and use of tools and sharps within the facility. Documentation of the control and inventory is maintained **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify):

Sight confirmation by inspector

Verbal confirmation by facility staff

DOC 350.19 Fire Safety. The jail shall have policies and procedures relating to fire safety.

DOC 350.19 (2) Each jail shall develop a fire safety policy in accordance with local fire department recommendations that addresses all of the following:

- Local fire department inspection requirements under sub. (5).
- Fire protection equipment location and maintenance. Each jail shall have and shall properly maintain fire alarms, smoke and thermal detectors, fire extinguishers and self-contained breathing apparatuses which operate for at least 30 minutes.
 - Fire extinguishers are properly maintained with recorded time and date of inspection.
 - Fire extinguishers are properly placed, secured and easily accessible to staff.
 - A fire extinguisher suitable for grease fires is provided in the kitchen.
 - Jail staff can demonstrate proficiency in the use of fire protection equipment.
- Training of staff in equipment use and the evacuation of inmates
 - Staff training is documented.

 d) A written evacuation plan Jail staff can articulate or demonstrate the evacuation routes and policies of the jail. 					
COMPLIANCE V	ERIFICATION				
Meets standard	Policy and procedure manual review	Previous compliance documented			
Needs improvement	Sample of facility records reviewed	Other (specify):			
Non-compliant [Sight confirmation by inspector				
Not reviewed	Not reviewed Verbal confirmation by facility staff				
Comments: Policy #027. The Florence County Jail was inspected by the Florence Fire Department on March 22, 2017. No violations were noted. Fire extinguishers are properly maintained and were inspected in June 2017. A written evacuation plan was reviewed on the day of the inspection. Jail staff were able to articulate evacuation routes when questioned. Jail staff received training in equipment use and the evacuation of inmates in April 2017. Simplex Grinnell conducted the annual sprinkler, fire alarm and smoke detector testing; no violations were noted.					
DOC 350.19 (3) The evacuation route developlace for jail staff in the jail.	ped as part of the evacuation plan under sub.	(2)(d) shall be posted in a conspicuous			
COMPLIANCE V	ERIFICATION				
Meets standard	Policy and procedure manual review	Previous compliance documented			
Needs improvement	Sample of facility records reviewed	Other (specify):			
Non-compliant	Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
·	tes are posted throughout the facility as respectively the procedures shall be practiced or simulate a documented.	•			
•	ERIFICATION				
Meets standard	Policy and procedure manual review	Previous compliance documented			
	Sample of facility records reviewed	Other (specify):			
Non-compliant	Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
Comments: Policies #027 and #031.					
DOC 350.19 (5) The facility shall be inspected by the local fire department at least once every 12 months and a record thereof shall be maintained. The fire inspection report supports that the facility conforms to applicable fire safety codes.					
COMPLIANCE V	ERIFICATION				
Meets standard	Policy and procedure manual review	Previous compliance documented			
Needs improvement	Sample of facility records reviewed	Other (specify):			
Non-compliant [Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
Comments: Policy #027. The facility was inspected by the Florence Fire Department on March 22, 2017; no violations					

were noted.

Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Non-compliant Sight confirmation by facility staff Comments: Policy #016. There were no use of force files to review during this inspection period. DOC 350.22 (2) Any staff member who has used force to control an inmate or inmates shall submit a written report to the sheriff, jail administrator or the staff member's supervisor describing the incident. The report shall include all known relevant facts and be submitted by the end of the shiff, unless otherwise authorized by the sheriff or sheriff's designee. - Supervisory review is conducted and documented.	DOC 350.19 (6) There shall be monthly inspections of the facility to ensure compliance with safety and fire prevention standards. Inspections shall be documented.					
Needs improvement	COMPLIANCE	VE	RIFICATION			
Non-compliant Sight confirmation by inspector Verbal confirmation by inspector Verbal confirmation by lacility staff	Meets standard	X	Policy and procedure manual review		Previous compliance documented	
Not reviewed	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):	
Comments: Policy #035. Monthly fire inspections are conducted at the facility and documented as required. DOC 350.22 Use of Force. The jail shall have policies and procedures for the use of force. DOC 350.22 (1) Jail staff may use physical force against an inmate only if force is necessary to change the location of an inmate or to prevent death or bodily injury to the staff member, the inmate or someone else, unlawful damage to property, or the escape of an inmate from the jail. Staff may use only the amount of force reasonably necessary to achieve the objective for which force is used. Corporal punishment of inmates is forbidden. COMPLIANCE VERIFICATION Meets standard Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #016. There were no use of force files to review during this inspection period. DOC 350.22 (2) Any staff member who has used force to control an inmate or inmates shall submit a written report to the sheriff, jall administrator or the staff member's supervisor describing the incident. The report shall include all known relevant facts and be submitted by the end of the shift, unless otherwise authorized by the sheriff or sheriff's designee. **Supervisory review is conducted and documented.** COMPLIANCE VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Non-compliant Sight confirmation by inspector Previous compliance documented Coments: Policy #016. DOC 350.23 (1) Restraint devices are never used as punishment and are not applied longer than necessary. Inventories are conducted and documented Compliance of restraints and control devices ar	Non-compliant		Sight confirmation by inspector			
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Comments: Policy #016. DOC 350.23 Use of restraints. The jail shall have policies and procedures governing the use of restraints and control devices. DOC 350.23 (1) Restraint devices are never used as punishment and are not applied longer than necessary. Inventories are conducted and documented. DOC 350.23 (2) When an inmate is mechanically restrained for non-routine purposes, a written report must be completed by the end of the shift, unless otherwise authorized by the sheriff or sheriff's designee. Documentation shall include the reason for use, duration of use and corresponding wellness checks. Supervisory review is conducted and documented COMPLIANCE VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant		┾				
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use and corresponding wellness checks. ■ Supervisory review is conducted and documented COMPLIANCE VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector						
COMPLIANCE VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Non-compliant Sight confirmation by inspector						
Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector	Supervisory review is conducted and documented					
Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector	COMPLIANCE	VE	RIFICATION			
Non-compliant Sight confirmation by inspector	Meets standard	X			Previous compliance documented	
	Needs improvement	\boxtimes			Other (specify):	
Not reviewed Verbal confirmation by facility staff	Non-compliant		, ,			
<u> </u>	Not reviewed		Verbal confirmation by facility staff			
Comments: Policy #016. One file including a use of restraint was submitted during this inspection period. The file was reviewed and found all requirements met.	•	_		ng	this inspection period. The file was	

Office of Detention Facilities DOC-2744 (4/2015)

DOC 350.24 Discipline. The jail shall have policies and procedures outlining inmate discipline and due process.

DOC 350.24 (1) Inmates rules of behavior. Every jail shall have written rules of behavior for inmates. At the time of admission, each person shall be notified verbally of the existence of jail rules for inmate behavior and the potential disciplinary actions for violations of the rules. Each inmate shall be provided with a copy of the jail rules or copies of the rules shall be posted in conspicuous places in the jail.

DOC 350.24 (2) Discipline for minor violation. (See code for specific language.)

- (a) A minor discipline is a verbal or written reprimand, restriction of privileges or placement in disciplinary segregation for 24 hours or less.
- (b) Inmate is informed of violation, potential discipline and disciplinary procedures for minor violations.
- (c) Inmate has opportunity to make verbal statement about alleged violation to a staff member
- (d) Staff member may impose a minor discipline if found that violation occurred
- (e) Supervisor is informed of incident by staff member. If supervisor concludes violation is major, then it shall be handled in accordance with Sub. (3). If supervisor finds that no violation occurred, the inmate shall be notified that the charge has been dismissed.
- (f) Inmate is notified of right to appeal and of appeal procedure.
- (g) Information made part of inmate's file. If supervisor finds no violation occurred, the due process records shall reflect those findings.

DOC350.24 (3) Discipline for major violation. (See code for specific language.)

- (a) A major discipline is restriction of privileges for more than 24 hours, placement in solitary confinement for more than 24 hours in accordance with s. 302.40, Stats., loss of good time in accordance with s. 302.43, Stats., restrictions affecting Huber law privileges in accordance s. 303.08, Stats., or restrictions affecting work release in accordance with s. 303.065, Stats.
- (b) Written report to supervisor within 24 hours of incident
- (c) Inmate notification of charges and right to hearing 24 hours in advance of hearing.
- (d) Due process hearing within seven calendar days, unless inmate waives the right to a due process hearing.
 - 1. Impartial hearing officer or committee (not involved in incident)
 - 2. Inmate's right to be present at hearing, make a statement and present evidence. Reason for inmate's absence documented.
 - 3. Inmate's right to present witnesses. Reason for absence of witness documented.
 - 4. Inmate's right to staff advocate if inmate is illiterate or if issues are complex.
 - 5. Hearing officer may consider inmate's mental illness, developmental disability or other emotional or mental disability as a mitigating factor in imposing discipline.
 - 6. Written decision stating discipline administered. Copy to inmate.
 - 7. Inmate is notified of right to appeal and appeal procedure
 - 8. Incident information, discipline administered and decision shall be made part of inmate file. If found no violation occurred, the due process records shall reflect those findings.
- e) If inmate waives right to a due process hearing, violation shall be disposed of in accordance with procedures for minor violations. Major discipline may be imposed if relevant staff member finds a violation occurred. Waiver does not constitute an admission of the alleged violation.

350.24(4) Classification.

(a)	(a) An inmate may be evaluated for custody classification following the imposition of discipline.						
COMPLIA	ANCE	VERIFICATION					
	Meets standard	Policy and procedure manual review	Previous compliance documented				
	Needs improvement	Sample of facility records reviewed	Other (specify):				
	Non-compliant	Sight confirmation by inspector					
	Not reviewed	Verbal confirmation by facility staff					

Comments: Policy #034. A review of a random sample of inmate disciplinary reports found all requirements were met and reports were documented correctly. As a reminder, for minor disciplinary reports, make sure to include a disposition.

HEALTH CARE

DOC 350.13 Inmate health screening. The jail shall have policies and procedures for inmate health screening.

DOC 350.13 (1) Use of a health screening form that is developed in conjunction with health care professionals and is used at booking with each inmate to record information about medical, mental health and dental conditions, physical and developmental disabilities, alcohol or other drug abuse problems and suicide risk.

DOC 350.13 (2) Referrals to medical, mental health or supervisory staff in a timely manner in response to identified concerns. If urgent concerns are identified, the referral shall be immediate.

DOC 350.13 (3) Review of the health screening form by health care or other designated staff within 72 hours if non-urgent concerns are identified.

Review by health care provider is conducted and documented.

DOC 350.13 (4) Documentation of health screening results and subsequent review of the health screening form in an inmate's confidential file.

- Health screening forms are legible, accurate and complete, including detailed narratives when necessary.
- Health care professionals provided input into the content of the health screening form.
- The health screening form contains usable information relating to the inmate's medical condition, dental condition, medical disabilities, developmental disabilities, alcohol and other drug abuse and suicide risk.
- A health screening form is completed for each inmate booked into the facility.
- The health screening forms are reviewed for completeness, accuracy, legibility and the appropriateness of the decisions made regarding referral, housing, classification and other actions.
- The identity of the person completing the health screening form is documented.

COMPLIANCE	VERIFICATIO	N				
Meets standard	Policy ar	d procedure manual review	Previous compliance documented			
Needs improvemen	nt Sample o	of facility records reviewed	Other (specify):			
Non-compliant Sight confirmation by inspector						
Not reviewed	∨erbal co	onfirmation by facility staff				
	omments: Policy #006. A random sample of screening forms were reviewed for this inspection. All were found to be roperly documented and reviewed by a health care provider during the required timeframe.					
OC 350.13 (5) A health appraisal that is to be completed within 14 days after arrival at the facility unless a health appraisal has been ompleted by health care staff within the previous 90 days. The health appraisal shall be completed by health care staff in accordance with protocols established by the responsible physician.						
COMPLIANCE	VERIFICATIO	N				
Meets standard	Policy ar	d procedure manual review	Previous compliance documented			
Needs improvemen	nt Sample o	of facility records reviewed	Other (specify):			
Non-compliant	Sight cor	firmation by inspector				
Not reviewed	∨erbal co	onfirmation by facility staff				
comments: Policy #022. A random sample of health appraisals was reviewed for this inspection; all were found to be properly completed and documented during the required timeframe.						
OOC 350.14 Inmate health of services in a confidential ma		t equipment, material, space and s	upplies for the performance of health care			
COMPLIANCE	VERIFICATIO	N				

Policy and procedure manual review

Sample of facility records reviewed

Sight confirmation by inspector Verbal confirmation by facility staff

Comments: Policy #JA02. The medical office contains sufficient space and equipment.

Meets standard

Non-compliant

Not reviewed

Needs improvement

Previous compliance documented

Other (specify):

Office of Detention Facilities DOC-2744 (4/2015) DOC 350.14 (1) The sheriff shall provide or secure necessary medical and mental health treatment and emergency dental care for inmates in custody. Jail provides a specific form for inmates to request medical assessment or treatment. All inmate requests for medical care are reviewed by health care staff. The dispositions of the inmate medical requests are documented by health care staff members. **VERIFICATION** COMPLIANCE Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #JA02. DOC 350.14 (3) Health care staff shall be in compliance with state and federal licensure certification and registration. Verification of compliance shall be maintained at the facility. **COMPLIANCE VERIFICATION** Previous compliance documented Meets standard Policy and procedure manual review Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #022. Licenses are maintained as required. DOC 350.14 (4) Medical records shall be kept separate from other records and shall be maintained in a confidential manner in accordance with s. 146.81 to s. 146.83, Stats., and any other applicable state or federal laws. Medical record accessibility is limited to medical staff, the jail administrator and the administrator's designees as appropriate. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #022. Records are maintained as required. DOC 350.14 (6) Officers shall receive documented annual training on health care policies and procedures, medications and health screening at the time of admission. **COMPLIANCE VERIFICATION** Policy and procedure manual review Previous compliance documented Meets standard Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #022. Staff completed the required training in October 2017. DOC 350.15 Health care policy. The jail shall have policies and procedures for inmate health care. DOC 350.15 (1) Documentation of health referrals made or health care provided. DOC 350.15 (2) Maintenance of documents in an inmate's confidential file. **COMPLIANCE VERIFICATION** Previous compliance documented Meets standard Policy and procedure manual review

Sample of facility records reviewed

Verbal confirmation by facility staff Comments: Policies #011 and #022. Health referrals and health care provided are properly documented and maintained

Sight confirmation by inspector

Needs improvement

Non-compliant Not reviewed

Other (specify):

in the inmate's confidential file.

	350.15 (3) Names, addresses and gency and routine health care se		ne numbers of health care providers or inmates.	agend	cies who have agreed to provide
•	Contact information is available	to staff.			
COMI	PLIANCE	VEF	RIFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):
	Non-compliant	\boxtimes	Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Comr	nents: Policy #010.				
DOC	350.15 (4) Referral of an inmate t	o jail hea	Ith care staff or to other agencies that p	provid	e health care.
•	Health care referrals are made a Staff are knowledgeable about t				
COMI	PLIANCE	VEF	RIFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement	$\overline{\boxtimes}$	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
DOC	350.15 (6) Non-emergency health	n care, in	cluding the use of an inmate's personal		ding emergency medical and dental care.
	PLIANCE		RIFICATION		
	1		Policy and procedure manual review		Previous compliance documented
	Needs improvement	<u> </u>	Sample of facility records reviewed		Other (specify):
	Non-compliant	<u> </u>	Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Comr	nents: Policies #010 and #011	-			
DOC •	list, or other appropriate means.	to medica			ook, posted notice, inmate rule and regulationable to read or write.
СОМІ	PLIANCE	VEF	RIFICATION		
$\overline{\boxtimes}$		\square	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
一	Non-compliant	一一	Sight confirmation by inspector		(-1 2)
	Not reviewed Verbal confirmation by facility staff				
Comr	1	nurse is	• • • • • • • • • • • • • • • • • • • •	total	of four hours. The doctor is at the
facili					tes in the Florence County Sheriff's

	DOC-2744 (4/2015)						
DO	35	0.15 (8) Provision for inmates with o	hrc	onic medical conditions.			
COI	MPL	IANCE \	/EF	RIFICATION			
	X	Meets standard	X	Policy and procedure manual review		Previous compliance documented	
Ī	i	Needs improvement	Ħ	Sample of facility records reviewed	$\overline{\sqcap}$	Other (specify):	
	1	Non-compliant	Ī	Sight confirmation by inspector	_		
Ī		Not reviewed	Ī	Verbal confirmation by facility staff			
Con	nme	nts: Policy #JA02. Protocols are	in	place.			
-	.						
DO	C 35	0.15 (9) Procedure for processing in	ma	te medical requests on a daily basis.			
		Inmate medical requests are documer	ntec	on an official medical request form.			
	•			e retained in inmate's confidential medical file			
COI	MPL	IANCE \	/EF	RIFICATION			
	X	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented	
		Needs improvement	$\overline{\Box}$	Sample of facility records reviewed	$\overline{\Box}$	Other (specify):	
Ī		Non-compliant	靣	Sight confirmation by inspector			
		Not reviewed	$\overline{\sqcap}$	Verbal confirmation by facility staff			
Con	nme	nts: Policy #011. Inmate medica	l re	equests are documented on a medical	l re	equest form and are reviewed by the	
		•		urse is present, medical requests are		•	
				emergent situation and the jail nurse			
				3			
DO	2 25	50.45 (40). December 44i-miles in-	4 .	le englishendiel medicel file of encourfemen			
		ou.15 (10) Documentation in an inm ng emergency services.	iate	es confidential medical file of any referra	ıaı	nd identification of the services provided,	
	uun	ig emergency services.					
	•	Health care services provided or refus	ed	are documented in the inmate's confidential m	ned	ical file.	
COI	MPL	IANCE \	/EF	RIFICATION			
	$\overline{\lambda}$	Meets standard	X	Policy and procedure manual review		Previous compliance documented	
Ī	i	Needs improvement	$\overline{\boxtimes}$	Sample of facility records reviewed	$\overline{\sqcap}$	Other (specify):	
Ī	1	Non-compliant	同	Sight confirmation by inspector	_		
Ī		Not reviewed	靣	Verbal confirmation by facility staff			
Con	nme	nts: Policy #022.					
00							
DO	C 35	0.15 (11) Provision of special diet if	ord	lered by a qualified health care professiona	al.		
		· , ,					
	•			care professional are documented in the inm			
	•	The jail health care providers, food sel care professional.	rvic	e providers, and correctional staff are notified	of s	special diets ordered by a qualified health	
		·					
				RIFICATION			
	<u> </u>	Meets standard	$\underline{\boxtimes}$	Policy and procedure manual review	Щ	Previous compliance documented	
ļ		Needs improvement	<u>Ц</u>	Sample of facility records reviewed	Ш	Other (specify):	
ļ		Non-compliant	<u> </u>	Sight confirmation by inspector			
		Not reviewed		Verbal confirmation by facility staff			
Con	nme	nts: Policy #023.					
DO	35	0.15 (12) Pregnancy management.					
COI	MPL	IANCE \	/EF	RIFICATION			
	$\overline{\mathbb{X}}$	Meets standard	$\overline{\mathbb{X}}$	Policy and procedure manual review		Previous compliance documented	
	\dashv	Needs improvement		Sample of facility records reviewed	Ħ	Other (specify):	
	╡	Non-compliant	Ħ	Sight confirmation by inspector	<u></u>		
	╡	Not reviewed	$\overline{\sqcap}$	Verbal confirmation by facility staff			
Con	nme	nts: Policy #022. Protocols are in	n r	<u> </u>			
CUI	Confinents. Folicy #022. Frotocols are in place.						

DOC-2744 (4/2015)					
DOC 350.15 (13) Maintenance of agreements	s between the jail and providers of health care	services.			
COMPLIANCE V	/ERIFICATION				
Meets standard	Policy and procedure manual review	Previous compliance documented			
Needs improvement	Sample of facility records reviewed	Other (specify):			
Non-compliant	Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
•	rrectional Healthcare provides medical se he jail physician is on site one time every	•			
DOC 350.15 (14) Use of health transfer sumr	mary form under s. 302.388 (2), Stats.				
Wisconsin State Statute 302.388 Prisoner m	edical records.				
to the receiving institution intake staff at the (b) If the jail does not have medical staff on dut possible and provide it to the receiving insti- within 24 hours after the transfer. 1. The jail medical staff, the prisoner's he under contract with the jail reviews the 2. The medical staff or health care provid- information. 3. The medical staff or health care provid- quickest available means to the receivi (bm) Jail medical staff need not complete the for the receiving institution intake staff at the (f) Receiving institution intake staff may make a 1. The prison's or jail's medical staff. 2. A prisoner's healthcare provider.	 possible and provide it to the receiving institution intake staff at the time of the transfer. The jailer shall ensure that all of the following occur within 24 hours after the transfer. The jail medical staff, the prisoner's health care provider or, if the prisoner does not have a health care provider, a health care provider under contract with the jail reviews the form provided to the receiving institution at the time of the transfer. The medical staff or health care provider reviewing the form corrects any errors in the form and includes in it any additional available information. The medical staff or health care provider reviewing the form transmits the updated form or the information included on the form by the quickest available means to the receiving institution intake staff. (bm) Jail medical staff need not complete the form if the jailer or his or her designee provides a copy of the prisoner's complete medical file to the receiving institution intake staff at the time of the transfer. (f) Receiving institution intake staff may make a health summary form available to any of the following: The prison's or jail's medical staff. A prisoner's healthcare provider. In the case of a prison or jail that does not have medical staff on duty at the time of the transfer, a health care provider designated by 				
COMPLIANCE	VEDIFICATION				
	/ERIFICATION	7 B · · · · · · · · · · ·			
	Policy and procedure manual review	Previous compliance documented			
	Sample of facility records reviewed	_ Other (specify):			
Non-compliant	Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
DOC 350.15 (15) Communicable disease and infection control. Policies and procedures relating to communicable disease and infection control shall contain all of the following components: (a) Provision of treatment and supervision of inmates during isolation or quarantine under s. 252.06(6)(b), Stats. (b) Documentation of the need for isolation or quarantine under s. 252.06(6)(b), Stats., in the inmate's confidential medical file. (c) Provision of laboratory screening for inmates who may have been exposed to a communicable disease if ordered by medical personnel.					
•	aste and decontaminating medical and dental equi	oment in accordance with regulations.			
	/ERIFICATION	7			
	Policy and procedure manual review	Previous compliance documented			
Needs improvement	Sample of facility records reviewed	Other (specify):			
Non-compliant	Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
Comments: Policy #037.					

Office of Detention Facilities DOC-2744 (4/2015)

		50.15 (16) Detoxification and manage	eme	ent of intoxicated inmates.			
	_		:	ما والأمام			
	Appropriate housing and supervision is provided.						
				RIFICATION			
	<u> </u>	Meets standard	$\underline{\underline{M}}$	Policy and procedure manual review	<u> </u>	Previous compliance documented	
	<u> </u>	Needs improvement	$\underline{\sqcup}$	Sample of facility records reviewed		Other (specify):	
<u></u>	4	Non-compliant	$\underline{\sqcup}$	Sight confirmation by inspector			
		Not reviewed	Ш	Verbal confirmation by facility staff			
Con	nm	ents: Policy #JA02.					
DO/	· ·	FO.4C Countries and administration of		disetions. The isil shall began religion on		was advers relation to the control delivery.	
		Iministration of prescription and non-			uμ	procedures relating to the control, delivery	
			-				
DO	3	50.16 (1) A qualified health care prof	ess	ional shall prescribe medications and orde	r tr	reatments.	
CO	ИP	LIANCE	VEF	RIFICATION			
	\times	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented	
		Needs improvement		Sample of facility records reviewed		Other (specify):	
		Non-compliant		Sight confirmation by inspector			
		Not reviewed		Verbal confirmation by facility staff			
Con	nme	ents: Policy #JA02.					
		•					
					of	medication at prescribed times. Annual	
doc	um	nented training shall be provided to ja	il s	taff that deliver medications.			
COI	ИP	LIANCE	VEF	RIFICATION			
	X	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented	
Ī		Needs improvement	$\overline{\Box}$	Sample of facility records reviewed		Other (specify):	
Ī	Ī	Non-compliant	$\overline{\sqcap}$	Sight confirmation by inspector			
		Not reviewed		Verbal confirmation by facility staff			
Con	nme	ents: Policy #011. Annual training	a is	provided as required; training admini	ste	ered in October 2017.	
DO	3	50.16 (3) Determination by appropria	ate	personnel that all medications brought in b	у і	nmates or other persons for an inmate are	
nec	ess	sary.					
		Verification of prescription medication	is r	performed by a health care provider or an app	ron	riately trained designee	
CO1	4D		-	RIFICATION	٦,	a.c.,aa acc.gcc.	
	_		VEI				
	<u>×</u>	Meets standard	Ä	Policy and procedure manual review		Previous compliance documented	
	4	Needs improvement	\underline{H}	Sample of facility records reviewed		Other (specify):	
	4	Non-compliant		Sight confirmation by inspector			
		Not reviewed	Ш	Verbal confirmation by facility staff			
Con	nm	ents: Policy #022.					
DO	~ 2	50.16 (4) All modications brought int	a 4h	ne jail shall be inventoried and placed in se	~ !!!	ro otorogo	
DO	<i>,</i> 3	30.10 (4) All medications brought int	O ti	ie jan snan be inventorieu and placeu in se	Cui	e storage.	
DO	DOC 350.16 (5) Any medications kept at the jail shall be stored in a locked drug cabinet that is not accessible to inmates.						
		The standard of investors displications as	_1	- the second and the Colore CC - bills			
	:	The storage of inmate medications m		s tnem readily identifiable. kept in a separate, medical refrigerator, unles:	c th	ne medications are secured in a senarate	
		locked container stored in a refrigeration			S II	ie medications are secured in a separate,	
CO	ИP	<u> </u>		RIFICATION			
		Meets standard		Policy and procedure manual review		Previous compliance documented	
<u>ь</u> Г	7	Needs improvement		Sample of facility records reviewed		Other (specify):	
<u>_</u>	╡	Non-compliant	$\frac{\square}{\square}$	Sight confirmation by inspector		J Outer (apecity).	
ř	┪	Not reviewed	\exists	Verbal confirmation by facility staff			
L	That reviewed Verbal commitmation by facility stain						

Office of Detention Facilities DOC-2744 (4/2015)

	("=0.0)				
Comme	ents: Policies #JA02 and #011. A	ll n	nedications are secured		
DOC 35	50.16 (6) Administration or delivery o	f pı	rescription and nonprescription medication	ns t	to inmates.
•	Personnel authorized to administer me	edic	ations are listed in the current policy and proc	edı	ure manual and accessible to all jail staff.
COMPL	IANCE	/EF	IFICATION		
	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Comme	ents: Policy #011.				
who ad	ministered or delivered the medication	on,	and the date and time of administration or	de	
			r prescribed medications by an inmate sha ance with requirements of s. 302.384, Stat		e documented. A health care
:	 The name of the pharmacist or qualified health care professional, the full (not abbreviated) name of the medication, the dosage and frequency, the date and time of administration or delivery, and any special instructions or comments are documented for each prescription medication. The medication administration and delivery records are reviewed by the health care provider and/or jail administrator or designee for completeness, accuracy, and legibility. 				
COMPL	IANCE	/EF	IFICATION		
\boxtimes	Meets standard	X	Policy and procedure manual review		Previous compliance documented
	Needs improvement	$\overline{\boxtimes}$	Sample of facility records reviewed	$\overline{\Box}$	Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\overline{\Box}$	Verbal confirmation by facility staff		
comple	eted as required. Stock medicat	ion	inistration Records (MARs) were reviewed and ure that stock medication flow sheets	fοι	und to be missing some entries to
DOC 350.16 (9) Return of an inmate's medication inventoried at admission. DOC 350.16 (10) Inventory or disposal of unused medications upon the inmate's release or transfer. The return of an inmate's medication is documented. Unused medication is disposed of by a health care provider, transferred with the inmate, or returned to a pharmacy.					
:	Established protocols regarding the di	spo	sal of narcotic medications, including witness edication is retained in the inmate's medical fi	pre	
COMPL	IANCE	/EF	RIFICATION		
	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement	$\underline{\sqcup}$	Sample of facility records reviewed		Other (specify):
<u> </u> _	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
Comme	ents: Policy #JA02. Medications b	oelo	onging to inmates are returned to ther	nι	upon their release.
			HIGH RISK SUPERVISION		
	50.17 Suicide prevention. The jail so at risk of seriously injuring themselv			the	supervision and housing of inmates who
COMPL	IANCE	/FR	RIFICATION		
	Meets standard		Policy and procedure manual review	\Box	Previous compliance documented
	Needs improvement	$\frac{\square}{\square}$	Sample of facility records reviewed	H	Other (specify):
	Non-compliant	+	Sight confirmation by inspector	Ш	Outer (apecity).
	Hon compliant	<u>ப</u>	Signa committation by inspector		

Office	e of Detention Facilities -2744 (4/2015)				WISCONSIN
	Not reviewed		Verbal confirmation by facility staff		
Comm	ents: Policies #006 and #036.		,,,		
	350.17 (1) Obtaining documented e or self-harm.	infor	mation from the arresting or transporting	gaç	gency to assess an inmate's potential for
COMP	LIANCE	VEF	RIFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
ヿ	Needs improvement	Ī	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Comm		nforr	nation is properly documented as req	Juir	ed by the arresting/transporting
:	Appropriate follow-up questions are Medical or mental health care profe A secondary security review of intak	ons a ate, a aske ssiona ce scr	re documented. and complete, including detailed narratives wh d and answers recorded, when suicide risk is als review intake screening reports when risk	ind is ir	icated.
COMP	LIANCE	VEF	RIFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement	X	Sample of facility records reviewed		Other (specify):
Ħ	Non-compliant	Ä	Sight confirmation by inspector		(CFCC)
百	Not reviewed		Verbal confirmation by facility staff		
Comm	ents: Policy #036.				
	nate on suicide watch shall include a Immediate notification to designated Designation of housing areas and s	all of d supe ecurit		cide suic	ide watch.
COMP	LIANCE	VEF	RIFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Comm	ents: Policy #036.				
			s who may assess an inmate's level of su	icid	e risk.
	PLIANCE		RIFICATION	_	
\square	Meets standard		Policy and procedure manual review		Previous compliance documented
<u> </u>	Needs improvement	<u> </u>	Sample of facility records reviewed		Other (specify):
<u> </u>	Non-compliant	<u> </u>	Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Comm	ents: Policy #036.				

DOC-2744 (4/2015) DOC 350.17 (5) Notification to qualified mental health professionals within 12 hours of placement of a potentially suicidal inmate on suicide watch. Assessment by a qualified mental health professional shall be completed as soon as practicable. Recommendations and decisions from qualified mental health professional are documented and maintained at the jail. **COMPLIANCE VERIFICATION** Policy and procedure manual review Meets standard Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #036. Notification is made to qualified mental health professionals as required per code; assessments are completed by a qualified mental health professional and documented as required. DOC 350.17 (6) Identification of qualified mental health professionals who are authorized to remove an inmate from a suicide watch status after an on-site face-to-face assessment. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: Policies #007 and #036. DOC 350.17 (7) Frequency of communication between health care and jail personnel regarding the status of an inmate who is on suicide watch. A clear and reliable means of communicating information between correctional staff members regarding inmates who are suicide risks is utilized. All communication between jail staff, administration, and medical/mental health care providers is documented, including names of those involved, summary of content of discussion, and actions taken. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #036. DOC 350.17 (8) Intervention protocol during an apparent suicide attempt, including life-sustaining measures. Staff demonstrate a working knowledge of first aid and emergency response measures. Staff are familiar with the location and effective use of emergency response equipment. Staff received training on emergency response, including use of emergency response equipment within the past evaluation period. The actions taken in response to a suicide in progress or suicide threat are documented. **COMPLIANCE VERIFICATION** Policy and procedure manual review Meets standard Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector

Verbal confirmation by facility staff

Not reviewed

Comments: Policy #036.

WISCONSIN Office of Detention Facilities DOC-2744 (4/2015) DOC 350.17 (9) Identification of persons to be notified in case of attempted or completed suicides. **COMPLIANCE** VERIFICATION Policy and procedure manual review Meets standard Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #036. DOC 350.17 (10) Documentation of actions and decisions regarding inmates who are suicide risks, including all of the following: (a) Individual initiating the suicide watch. (b) Date and time watch was initiated. (c) Reason watch was initiated. (d) Name of supervisor contacted. (e) Date and time supervisor contacted. (f) Name, date, and time of referral to mental health professional. (g) Written documentation from the mental health professional removing an inmate from a suicide watch including name, date and time. Supervisory review of the relevant documentation is completed. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #036. Documents reviewed during this inspection were found to include all required information. DOC 350.17 (11) Implementation of 2 hours of annual documented staff training regarding suicide prevention and identification of risk factors. **COMPLIANCE VERIFICATION** Policy and procedure manual review Previous compliance documented Meets standard Sample of facility records reviewed Needs improvement Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: Policy #036. Two hours of annual documented training regarding suicide prevention was administered in October 2017. DOC 350.17 (12) Access by staff to debriefing and support services. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #036. DOC 350.17 (13) Implementation of an operational review following a suicide or significant suicide attempt. **COMPLIANCE** VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector

Verbal confirmation by facility staff

Not reviewed

Comments: Policy #036.

DOC-2744 (4/2015) DOC 350.25 Administrative confinement. In this section, "administrative confinement" means a non-punitive, segregated confinement of an inmate in his or her cell or other designated area to ensure personal safety and security within the jail. The jail shall have policies and procedures outlining the administrative confinement process. DOC 350.25 (1) An inmate may be placed in administrative confinement if the inmate's continued presence in the general population meets one of the following: (a) Presents a substantial risk of physical harm to the inmate, another person or property. (b) Threatens the security and order of the jail. (c) Inhibits a pending disciplinary investigation. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #014. A random sample of administrative confinement reports were reviewed during this inspection and were found to be compliant with Administrative Code 350. DOC 350.25 (2) A jail staff member shall inform his or her supervisor of any incident that may require administrative confinement of an inmate and the supervisor shall determine whether to place the inmate in administrative confinement. In the absence of his or her supervisor, a jail staff member may place an inmate in administrative confinement. The staff member's supervisor shall review that placement decision within 24 hours. This review shall include evaluation of inmate's classification. **COMPLIANCE VERIFICATION** Policy and procedure manual review Meets standard Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: Policy #014. DOC 350.25 (3) An inmate's progress in administrative confinement shall be reviewed by a supervisor at least once every seven days. The supervisor shall determine when the inmate no longer presents a threat to the safety, security and order of the jail and may be released to the general population. Each review shall be documented. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #014. DOC 350.25 (4) The reason an inmate is placed in administrative confinement and the length of time the inmate remains in administrative confinement shall be documented in the inmate's file. The inmate is informed of the reasons and conditions of the inmate's Administrative Confinement. **COMPLIANCE** VERIFICATION Previous compliance documented Meets standard Policy and procedure manual review Needs improvement Sample of facility records reviewed Other (specify):

Sight confirmation by inspector

Verbal confirmation by facility staff

Non-compliant
Not reviewed

Comments: Policy #014.

RECORDS AND REPORTING

DOC 350.10 Records and reporting.

DOC 350.10 (1) Register of inmates. Each jail shall keep a register of all inmates. The register shall contain identifying information on each inmate, including name, residence, age, sex, race, court order, time and cause of placement and placing authority, and time of release and releasing authority. If an inmate escapes, the time and manner of the escape shall be recorded in the register.

COMPLIANCE		VERIFICATION				
	Meets standard		Policy and procedure manual review		Previous compliance documented	
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):	
	Non-compliant	\boxtimes	Sight confirmation by inspector			
	Not reviewed		Verbal confirmation by facility staff			

Comments: Information regarding inmates is contained in the facility's electronic management system; it is also contained in the booking documents.

DOC 350.10 (2) Storage of records. Records shall be kept in a secure area. Juvenile records shall be kept separate from adult records and shall be maintained in a confidential manner in accordance with s. 938.396, Stats., and any other applicable federal or state law.

COMPLIANCE		VERIFICATION				
\boxtimes	Meets standard		Policy and procedure manual review		Previous compliance documented	
	Needs improvement		Sample of facility records reviewed		Other (specify):	
	Non-compliant	\boxtimes	Sight confirmation by inspector			
	Not reviewed		Verbal confirmation by facility staff			

Comments: Records are stored as required.

MAINTENANCE OF JAIL, SANITATION AND CARE OF PRISONERS

Wisconsin State Statute 302.37 Maintenance of jail and care of prisoners.

Wisconsin State Statute 302.37 (1) (a) The sheriff or other keeper of a jail shall constantly keep it clean and in a healthful condition and pay strict attention to the personal cleanliness of the prisoners and shall cause the clothing of each prisoner to be properly laundered. The sheriff or keeper shall furnish each prisoner with clean water, towels and bedding. The sheriff or keeper shall serve each prisoner 3 times daily with enough well-cooked, wholesome food. The county board shall prescribe an adequate diet for the prisoners in the county jail.

Wisconsin State Statute 302.37(3)(a) The county or municipality shall furnish its jail with necessary bedding, clothing, toilet facilities, light and heat for prisoners

Wisconsin State Statute 302.37 (4) The sheriff or other keeper of a jail may use without compensation the labor of any prisoner sentenced to actual confinement in the county jail or, with the prisoner's consent, any other prisoner in the maintaining of and the housekeeping of the jail, including the property on which it stands. Any prisoner who escapes while working on the grounds outside the jail enclosure shall be punished as provided in s. 946.42.

- A daily inspection is conducted by jail staff of housekeeping, sanitation, and physical plant maintenance.
- The jail is constantly clean and in a healthful condition.
- Inmate areas are free of graffiti, posters, wall coverings, etching, etc.
- All surfaces, equipment, and facilities are clean and in good repair.
- Air handling systems, including ventilation screens and covers, are clean, unobstructed, and in good working order.
- Inmate personal property allowed in the housing units is subject to limitations on volume and content.
- Inmates are held accountable for making the beds, cleaning the floors, cleaning the common bathroom facilities, properly storing property, and maintaining cleanliness and order in the housing units daily.
- Inmates and staff are held accountable for housekeeping and sanitation deficiencies.
- Identified maintenance needs are addressed in a timely manner.
- Hallways are free of clutter and obstructions.

DEPARTMENT OF CORRECTIONS
Office of Detention Facilities
WISCONSIN

DOC-2	2744 (4/2015)				
COMPL	.IANCE \	/EF	IFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):
	Non-compliant	\boxtimes	Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
			I to be in a clean and healthful condi		
DOC 35	50.12 Sanitation and Hygiene. The jai	l sh	all have policies and procedures relating	j to s	anitation and hygiene.
DOC 35	50.12 (1) Facilities are required to be	cle	an and in good repair.		
COMPL			IFICATION		
	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed	퓜	Other (specify):
一片	Non-compliant	$\frac{\square}{\square}$	Sight confirmation by inspector	Ш	Other (Specify).
- H	Not reviewed		Verbal confirmation by facility staff		
Commo		in	good repair and is clean and sanitar	.,	
Comme	ents. Folicy #024. The Jali is kept		good repair and is clear and samilar	у.	
DOC 35	50.12 (2) Blankets shall be laundered	ma	onthly and before reissue.		
20000			y and soloto relocati		
DOC 35	50.12 (3) Sheets, pillowcases and ma	ttre	ss covers shall be changed and washed	at le	ast weekly and before reissue.
DOC 35	50.12 (4) Clean towels shall be issued	d to	each inmate twice a week		
COMPL			IFICATION		
	Meets standard	$\frac{\square}{\square}$	Policy and procedure manual review	<u> </u>	Previous compliance documented
	Needs improvement	$\underline{\underline{M}}$	Sample of facility records reviewed		Other (specify):
	Non-compliant	Щ	Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
			dule was reviewed with inmates duri	_	•
	•		re reissue. Bedding is laundered we	ekly	y and before reissue, and clean
towels	are provided to each inmate twi	се	a week.		
DOC 35	50.12 (5) Mattresses shall be provid	ed	where there is a need for overnight dete	ntio	n. Each mattress and each pillow, if used,
					pillows shall be kept in good repair and in
a clean	and sanitary condition. The sheriff s	hal	provide adequate bedding. Mattresses	shall	be cleaned and sanitized before reissue.
DOC 35	50 12 (6) Suppliers of mattresses and	nill	ows shall be provide evidence to the she	riff t	hat the products are fire retardant
	roof, and easy to clean.	Pili	ows shall be provide evidence to the she		mat the products are the retardant,
	•				
DOC 35	50.12 (7) Mattresses shall be of prope	er s	ze to fit the bed.		
COMPL	IANCE	/EF	IFICATION		
	Meets standard	X	Policy and procedure manual review		Previous compliance documented
	Needs improvement	Ħ	Sample of facility records reviewed	一一	Other (specify):
一百	Non-compliant	$\overline{\boxtimes}$	Sight confirmation by inspector		Caron (opening).
一百	Not reviewed	\Box	Verbal confirmation by facility staff		
Commo		<u></u>	d on the day of the inspection were i	in nr	oper condition
Comme	ents. Fulley #024. Mattresses vie	we	d on the day of the inspection were i	прі	oper condition.

			nmate whose clothing has been confis n custody. Footwear shall be cleaned a		d with adequate and appropriate clothing, anitized before reissue.
COMPL	IANCE	VER	IFICATION		
	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed	F	Other (specify):
一百	Non-compliant		Sight confirmation by inspector		de carrot (opecary).
一百	Not reviewed		Verbal confirmation by facility staff		
cleane	ed and sanitized before reis 50.12 (9) Laundry schedule sh	ssue.			hing, including footwear. Footwear is allowed clothing items are laundered twice
		\ (50	IEIO A TION		
COMPL			IFICATION		_
	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
<u></u> _	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
Comme	ents: Policy #024.				
	unds shall be stored independ IANCE Meets standard Needs improvement	dently and	IFICATION Policy and procedure manual review Sample of facility records reviewed		asy identification of contents. Poisonous ocked area not accessible to inmates. Previous compliance documented Other (specify):
_ H	Non-compliant		Sight confirmation by inspector		
Comme	Not reviewed ents: Policy #024. Protocol	s are in p	Verbal confirmation by facility staff ace.		
and hy	giene, including toothpaste ar vided to inmates upon request	nd toothbru	sh, soap and comb. Basic feminine hyg	jiene	fficient for the maintenance of cleanliness materials for females and toilet paper shall bs, shaving materials or feminine hygiene
COMPL	IANCE	VER	IFICATION		
	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant	\boxtimes	Sight confirmation by inspector		
	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff		
Comme	ents: Policy #006.		,		
	50.12 (12) Inmates are provide sed for passing meals or othe			on u	se and meals shall be kept sanitized. Door
COMPL	IANCE	VER	IFICATION		
	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		(open.)).
+	Not reviewed	+	Verbal confirmation by facility staff		
		المامة الم		ا ام	and housing wit
Comme	ents. Policy #UZ4. A Dottle	or cleanin	g solution and towels are maintaine	ea ir	i each nousing unit.

DOC-2744 (4/2015)

DOC-2744 (4/2015)					
DOC 350.12 (13) Safety and sanitation inspe	ections of the jail are completed and documente	d at a minimum of once monthly.			
COMPLIANCE	/ERIFICATION				
Meets standard	Policy and procedure manual review	Previous compliance documented			
Needs improvement	Sample of facility records reviewed	Other (specify):			
Non-compliant	Sight confirmation by inspector	- (1)/			
Not reviewed	Verbal confirmation by facility staff				
Comments: Policy #024. Safety and sanitation inspections are completed monthly and documented as required.					
DOC 350.12 (14) Common use grooming to	ols are disinfected and cleaned before reissue a	nd are stored in a secure area.			
COMPLIANCE	/ERIFICATION				
Meets standard	Policy and procedure manual review	Previous compliance documented			
Needs improvement	Sample of facility records reviewed	Other (specify):			
Non-compliant	Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
Comments: Policy #024.					
D00.050.40.(45). D					
DOC 350.12 (15) Property storage contained	's shall be sanitized before reuse.				
 Property storage containers may inclu 	de bags, bins, totes and lockers.				
COMPLIANCE	/ERIFICATION				
Meets standard	Policy and procedure manual review	Previous compliance documented			
Needs improvement	Sample of facility records reviewed	Other (specify):			
Non-compliant	Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
Comments: Policy #024. Property storage	ge containers are properly sanitized by jail	staff before reuse.			
DOC 350.12 (16) Trash is removed daily fro	m all dayrooms.				
COMPLIANCE	/ERIFICATION				
Meets standard	Policy and procedure manual review	Previous compliance documented			
Needs improvement	Sample of facility records reviewed	Other (specify):			
Non-compliant	Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
Comments: Policy #024. Trash is remove	red daily from all dayrooms.				
DOC 350.12 (17) Hazardous waste shall be	disposed of according to government regulation	s.			
• •	/ERIFICATION				
Meets standard	Policy and procedure manual review	Previous compliance documented			
Needs improvement	Sample of facility records reviewed	Other (specify):			
Non-compliant Net reviewed	Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
Comments: Policy #024.					

		f Detention Facilities 744 (4/2015)				
DC	10-21	44 (472013)		INMATE SERVICES		
		0.26 Grievance Process. The jail s e to all inmates and includes at leas		have policies and procedures relating to a	n i	inmate grievance process and ensure it is
COI	/IPLI	ANCE	VEF	RIFICATION		
	$\overline{\mathbf{X}}$	Meets standard	\boxtimes	Policy and procedure manual review	\Box	Previous compliance documented
		Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):
		Non-compliant		Sight confirmation by inspector		
		Not reviewed	\boxtimes	Verbal confirmation by facility staff		
con	nple	ted by the Sheriff.		are reviewed and responded to by the policies and procedures to address inmate		··
		iterials.		, , , , , , , , , , , , , , , , , , ,		
COV	/IPLI	ANCE	VEF	RIFICATION		
	\overline{A}	Meets standard	\boxtimes	Policy and procedure manual review	٦	Previous compliance documented
Ī		Needs improvement		Sample of facility records reviewed	Ī	Other (specify):
		Non-compliant	$\overline{\boxtimes}$	Sight confirmation by inspector		· · · · · · · · · · · · · · · · · · ·
		Not reviewed	\boxtimes	Verbal confirmation by facility staff		
DOC	350	0.28 (1) The jail shall establish defir	itio	cies and procedures to address indigence. ns and procedures to define indigence. programming and essential services is not	t ni	recluded by inability to nav
		* *		RIFICATION		
		Meets standard	VER		\neg	Provinue compliance decumented
<u> </u>	-	Needs improvement	horall	Policy and procedure manual review Sample of facility records reviewed	┽	Previous compliance documented
	╬	·	믐			Other (specify):
	+	Non-compliant Not reviewed	Η	Sight confirmation by inspector Verbal confirmation by facility staff	—	
			<u> </u>	• •	—	
Com	ımer	nts: Policies #004, #010, #011 a	na	#022.		
atto DOC	rney 350 •	25, the court system, government of 2.29 (1) Provision for staff inspection. Staff demonstrate a working knowledge.	ficia on a ge o	nd reading of non-privileged incoming and	ou	tgoing mail.
		Staff demonstrate a working knowledge	ge o	f the definition of privileged mail and the proced	du	res for inspecting it.
				RIFICATION		
	711 LI	Meets standard	X	Policy and procedure manual review	\neg	Previous compliance documented
<u> </u>	7	Needs improvement	$\frac{\square}{\square}$	Sample of facility records reviewed	븍	Other (specify):
<u> </u>	\exists	Non-compliant	+	Sight confirmation by inspector		Oniei (specily).
- 1		. to oomphant	1 1	organ commination by mopoliti		

Verbal confirmation by facility staff

Comments: Policy #019.

Not reviewed

Office of Detention Facilities DOC-2744 (4/2015)

COMPL	Inmate mail is delivered to inm				
	IANCE	VER	RIFICATION		
\square	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed	一一	Other (specify):
	Non-compliant		Sight confirmation by inspector		Tourist (opeony).
一一	Not reviewed		Verbal confirmation by facility staff		
	ents: Policy #019.	sition of co	ontraband items found in mail.		
•	Contraband items are inventor Contraband is promptly turned	ried and doo	cumented.		
COMPI	IANCE	VER	RIFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Comme	ents: Policy #019.				
DOC 3	50.29 (5) Provision of postage	to indiger	nt inmates		
	IANCE				
COMPL		VER	RIFICATION		Provious compliance decumented
	Meets standard		RIFICATION Policy and procedure manual review		Previous compliance documented
COMPL	Meets standard Needs improvement	VER	RIFICATION Policy and procedure manual review Sample of facility records reviewed		Previous compliance documented Other (specify):
COMPL	Meets standard Needs improvement Non-compliant	VER	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector		
COMPI	Meets standard Needs improvement	VER	RIFICATION Policy and procedure manual review Sample of facility records reviewed		
COMPL	Meets standard Needs improvement Non-compliant Not reviewed ents: Policy #019.	VEF	RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff when outgoing or incoming mail is with		Other (specify):
COMPI	Meets standard Needs improvement Non-compliant Not reviewed ents: Policy #019. 50.29 (6) Provision for notifying A non-delivery of mail form is of	VER	Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff when outgoing or incoming mail is withing and provided to the inmate when mail is confirmation.		Other (specify):
COMPI	Meets standard Needs improvement Non-compliant Not reviewed ents: Policy #019. 50.29 (6) Provision for notifyin A non-delivery of mail form is o	VER	RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff when outgoing or incoming mail is withhead provided to the inmate when mail is confirmation.		Other (specify): ted, destroyed, or rejected.
COMPL	Meets standard Needs improvement Non-compliant Not reviewed ents: Policy #019. 50.29 (6) Provision for notifying A non-delivery of mail form is of the complex of the	VER	RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff when outgoing or incoming mail is withten and provided to the inmate when mail is confirmation. RIFICATION Policy and procedure manual review		Other (specify): ted, destroyed, or rejected. Previous compliance documented
COMPL	Meets standard Needs improvement Non-compliant Not reviewed ents: Policy #019. 50.29 (6) Provision for notifyin A non-delivery of mail form is of the complex standard Needs improvement	VER	RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff when outgoing or incoming mail is withit and provided to the inmate when mail is confirmation RIFICATION Policy and procedure manual review Sample of facility records reviewed		Other (specify): ted, destroyed, or rejected.
COMPI	Meets standard Needs improvement Non-compliant Not reviewed ents: Policy #019. 50.29 (6) Provision for notifying A non-delivery of mail form is of the complex of the	VER	RIFICATION Policy and procedure manual review Sample of facility records reviewed Sight confirmation by inspector Verbal confirmation by facility staff when outgoing or incoming mail is withten and provided to the inmate when mail is confirmation. RIFICATION Policy and procedure manual review		Other (specify): ted, destroyed, or rejected. Previous compliance documented

Office of Detention Facilities DOC-2744 (4/2015) DOC 350.30 Visitation. The jail shall have policies and procedures relating to visitation. DOC 350.30 (1) Establishment of a visiting schedule for family, friends, attorneys, and others. Attorney visits shall be allowed during reasonable hours, as long as security and daily routine are not unduly interrupted. DOC 350.30 (2) Establishment of procedures for requesting visitation during nonscheduled times. Accommodations are made for visits to occur at times other than scheduled visiting times. **COMPLIANCE VERIFICATION** Policy and procedure manual review Previous compliance documented Meets standard Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policies #040 and #041. Visitation is offered on Wednesdays from 7 pm to 9 pm and on Sundays from 1 pm to 4 pm. Visits are 15 minutes in length; longer visits are allowed on a case-by-case basis. DOC 350.30 (3) Documentation of all visits through a visitor log or register. All non-jail staff members who enter the jail are documented on the visitor's log or other appropriate register. COMPLIANCE **VERIFICATION** Previous compliance documented Meets standard Policy and procedure manual review Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #040. A visitor's log is maintained by the jail staff. DOC 350.30 (4) Establishment of a search policy of visitors and their possessions. Personal contact visitors are subject to a search procedure. Program workers and volunteers are subject to strict guidelines regarding personal items, carry-in equipment and compliance with jail policies. Law enforcement/Community Corrections/ Legal visitors are required to adhere to safe correctional practices limiting carry-in items and may be subject to search. Jail staff consistently apply visitation and search standards to all non-jail staff. **COMPLIANCE** VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: Policy #040. DOC 350.30 (5) Posting of visitation policies and procedures, including visitation schedule, in a place readily accessible to visitors and inmates. **COMPLIANCE** VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify):

Comments: Policy #040. Visitation policies and procedures are posted at the front window of the facility and also found in the inmate rule book.

Sight confirmation by inspector

Verbal confirmation by facility staff

Non-compliant

Not reviewed

WISCONSIN Office of Detention Facilities DOC-2744 (4/2015) DOC 350.30 (6) Establishment of a search policy for inmates before and after each visit. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #018. DOC 350.31 Programs and services. The jail shall have policies and procedures relating to the provision of inmate programs and services. DOC 350.31 (1) Use of community resources, contract providers, and volunteers authorized by the sheriff. DOC 350.31 (2) Notification to inmates of availability, eligibility, and schedules. DOC 350.31 (3) Conducting criminal background checks on all volunteers, community resources, and contract providers. DOC 350.31 (4) Orientation and training on facility operations for all volunteers. DOC 350.31 (5) Educational programming for inmates who are under 18 years of age consistent with the requirements of the Department of Public Instruction. **COMPLIANCE VERIFICATION** Policy and procedure manual review Meets standard Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policies #041 and #042. Programs provided include AA, NA, Bible Study, GED and college courses (at inmate's own expense). DOC 350.32 Religious programming. Inmates shall have the opportunity to participate in practices of their religious faith consistent with existing state and federal statutes. The jail shall have policies and procedures relating to religious programming. DOC 350.32 (1) Identification of religious organizations and clergy willing to conduct religious services in the facility. DOC 350.32 (2) Notification to inmates of the schedule of religious services available in the jail. Staff demonstrate a knowledge of the procedure for assessing and responding to inmate requests for religious services. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #033. DOC 350.32 (3) Identification of religious items that may be kept on an inmate's person or in the cell. If religious items are permitted, the policies are consistently applied throughout the jail. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented

Sample of facility records reviewed

Verbal confirmation by facility staff

Sight confirmation by inspector

Comments: Policy #033

Needs improvement

Non-compliant

Not reviewed

Other (specify):

DOC-2744 (4/2015)		
DOC 350.32 (4) Conducting criminal background	ound checks on members of a religious organiz	ation and clergy.
COMPLIANCE	ERIFICATION	
Meets standard	Policy and procedure manual review	Previous compliance documented
Needs improvement	Sample of facility records reviewed	Other (specify):
Non-compliant	Sight confirmation by inspector	2 (-1 2)
Not reviewed	Verbal confirmation by facility staff	
Comments: Policy #042.		
DOC 350.32 (5) Orientation and training on f	acility operations for all volunteers.	
 Documentation of the orientation and v 	olunteer agreement is on file.	
COMPLIANCE V	ERIFICATION	
Meets standard	Policy and procedure manual review	Previous compliance documented
Needs improvement	Sample of facility records reviewed	Other (specify):
Non-compliant	Sight confirmation by inspector	
Not reviewed	Verbal confirmation by facility staff	
Comments: Policy #042.		
DOC 350.33 (1) Identification of the recreation	policies and procedures relating to recreation. onal activities that are available.	
DOC 350.33 (2) Schedule of recreational act	ivities.	
COMPLIANCE V	ERIFICATION	
Meets standard	Policy and procedure manual review	Previous compliance documented
Needs improvement	Sample of facility records reviewed	Other (specify):
Non-compliant	Sight confirmation by inspector	
Not reviewed	Verbal confirmation by facility staff	
Comments: Policy #012. Recreation is lin	mited to dayroom activities.	
DOC 250 22 (2) When and where suchable	t least one have of delly average and represting	in autaida tha anll an autalaana
	t least one hour of daily exercise and recreation	is outside the cell of outdoors.
	ERIFICATION	
	Policy and procedure manual review	Previous compliance documented
Needs improvement	Sample of facility records reviewed	Other (specify):
Non-compliant	Sight confirmation by inspector	
Not reviewed	Verbal confirmation by facility staff	
Comments: Policy #012.		
DOC 350.34 Publications. The jail shall have	policies and procedures relating to access to p	oublications.
DOC 050 04 (4) D		
DOC 350.34 (1) Provision of publications of	general interest for inmates such as books, nev	vspapers and magazines.

 There are limitations on the volume of personal reading materials that can be kept in the housing area, and these limitations are enforced consistently throughout the jail.

DOC 350.34 (3) Inspection of publications brought by visitors for inmates if the jail allows visitors to bring in reading materials.

DOC 350.34 (2) Identification of publications that are prohibited for inmates because their content creates a security risk.

Reading material restrictions are posted or otherwise accessible to inmates.

	of Detention Facilities 2744 (4/2015)			
		/EF	RIFICATION	
	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Other (specify):
	Non-compliant		Sight confirmation by inspector	
	Not reviewed		Verbal confirmation by facility staff	
Comme	ents: Policy #041.			
		olic	ies and procedures for the establishment ar	nd use of canteen, vending or other similar
service	es for inmates.			
DOC 3	50.35 (1) Canteen shall be made avai	labl	e to eligible inmates.	
			_	
DOC 3	50.35 (2) Access to canteen may be r	est	ricted by the facility based upon inmate class	sification or status.
COMPL	LIANCE	/EF	RIFICATION	
	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Other (specify):
	Non-compliant		Sight confirmation by inspector	
	Not reviewed	\boxtimes	Verbal confirmation by facility staff	
Comme	ents: Policy #041.			
	<u> </u>			
			FOOD SERVICE	
DOC 3	50.11 Food Service. The jail shall ha	ve į	policies and procedures relating to food serv	ice.
DOC 3	50.11 (1) The jail shall provide nutriti	ous	and quality food for all inmates.	
DOC 35	50 11 (2) An annual menu review by a	a aı	ialified nutritionist or dietician shall be comp	leted and maintained in the facility files
COMPL		_	RIFICATION	1
	Meets standard		Policy and procedure manual review	Previous compliance documented
- $ otherwise$	Needs improvement	width	Sample of facility records reviewed	Other (specify):
_	Non-compliant	Щ	Sight confirmation by inspector	
	Not reviewed	Ш	Verbal confirmation by facility staff	
			as completed by Ms. Pevytoe (RD & CD	
			changes to fruit and bread servings to e	
servin	gs and an added statement for a	gc	oal of half the breads and cereals served	d be whole grain.
			production and service kitchens in a jail by a	qualified, independent outside source
docum	enting that the food service area mee	ets l	nealth and safety codes.	
COMPL	LIANCE	/EF	RIFICATION	
$\overline{\boxtimes}$	Meets standard	X	Policy and procedure manual review	Previous compliance documented
	Needs improvement	$\overline{\square}$	Sample of facility records reviewed	Other (specify):
一百	Non-compliant	\Box	Sight confirmation by inspector	de de la composition della com
一百	Not reviewed	П	Verbal confirmation by facility staff	
Comme		Di	strict Health Department completed an	inspection of the Florence County Jail
			ns were noted and corrected at the time	
				<u> </u>
DOC 3	50.11 (4) Internal monthly inspection	of 1	the food service area is completed and docu	mented.
COMPL	IANCE \	/EF	RIFICATION	
$\overline{\boxtimes}$	Meets standard	X	Policy and procedure manual review	Previous compliance documented
	Needs improvement	$\overline{\square}$	Sample of facility records reviewed	Other (specify):
一一	Non-compliant	Ħ	Sight confirmation by inspector	(-1)/-
	Not reviewed	Ħ	Verbal confirmation by facility staff	
Comme		- C	ompleted and documented as required.	
-5	r chay hozor mopoutorio are	- 0		

DOC-2744 (4/2015) DOC 350.11 (5) The kitchen area and all equipment are maintained in a sanitary condition. Routine inspections are completed and documented. COMPLIANCE VERIFICATION Policy and procedure manual review Previous compliance documented Meets standard Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: Policy #023. The kitchen area and all equipment were found in sanitary condition on the day of inspection. DOC 350.11 (6) Three nutritious meals are provided daily, two of which are hot. Variations may be allowed based on weekend and holiday food service demands, provided basic nutritional goals are met. COMPLIANCE VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Verbal confirmation by facility staff Not reviewed Comments: Policy #023. DOC 350.11 (7) Food temperatures are properly maintained. Documentation of daily food preparation temperatures is maintained. Documentation of periodic serving temperature readings is maintained. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #023. Food temperatures are properly maintained and documented as required. DOC 350.11 (8) Food items are stored appropriately at least 6 inches off the floor. Opened food packages are stored in airtight containers that are labeled and dated. Food items are stored in appropriate locations and temperatures. Documentation of daily cooler and freezer temperatures is maintained. **COMPLIANCE VERIFICATION** Policy and procedure manual review Meets standard Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: Policy #023. Food items are stored as required. DOC 350.11 (9) Special diets are provided as prescribed by a qualified health care professional. Documentation of special diet orders is maintained. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff

Comments: Policy #023.

			. Consistent with available resources, the jail l. The substitutions shall be consistent with
COMPLIANCE	VEI	RIFICATION	
Meets standard	X	Policy and procedure manual review	Previous compliance documented
Needs improvement	Ī	Sample of facility records reviewed	Other (specify):
Non-compliant		Sight confirmation by inspector	
Not reviewed	Ī	Verbal confirmation by facility staff	
Comments: Policy #023.			
uniform.			the or shower daily and be provided a clean
DOC 350.11 (13) All persons who work in a hands clean at all times when engaged in cleaning of the fingernails.	the	handling of food, drink, utensils or equipm	nd clean caps or hairnets and shall keep their ent. Particular attention shall be given to the
COMPLIANCE	VE	RIFICATION	
Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
Needs improvement		Sample of facility records reviewed	Other (specify):
Non-compliant	\boxtimes	Sight confirmation by inspector	
Not reviewed	\boxtimes	Verbal confirmation by facility staff	
■ Documentation of orientation and tra COMPLIANCE	ining		t in the kitchen area.
Meets standard	X	Policy and procedure manual review	Previous compliance documented
Needs improvement	${\Box}$	Sample of facility records reviewed	Other (specify):
Non-compliant	H	Sight confirmation by inspector	Other (specify).
Not reviewed	X	Verbal confirmation by fracility staff	
Comments: Policy #008.		versar communation by facility stain	
		d throughout all aspects of food preparation	on and service.
COMPLIANCE		RIFICATION	Draviana approficación de la
Meets standard	\times	Policy and procedure manual review	Previous compliance documented
Needs improvement	<u> </u>	Sample of facility records reviewed	Other (specify):
Non-compliant		Sight confirmation by inspector	
Not reviewed	X	Verbal confirmation by facility staff	
Comments: Policy #023.			
DOC 350.11 (16) Food and drink shall be p		cted from contamination. Meals are covere	ed during transit to and within the facility.
COMPLIANCE	VEI	RIFICATION	
Meets standard		Policy and procedure manual review	Previous compliance documented
Needs improvement		Sample of facility records reviewed	Other (specify):
Non-compliant	\boxtimes	Sight confirmation by inspector	
Not reviewed	\boxtimes	Verbal confirmation by facility staff	
Comments: Policy #023. Meals are cov	vere	d during transport.	

Non-compliant Not reviewed

DOC-2744 (4/2015) DOC 350.11 (17) Kitchen food storage and dishwashing equipment temperatures are routinely monitored and documented. **VERIFICATION COMPLIANCE** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: Policy #023. Documentation is completed as required. DOC 350.11 (18) Garbage containers are covered, emptied daily, and are kept clean. **VERIFICATION** COMPLIANCE Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #023. DOC 350.11 (19) Cleaning agents are stored separately from food service items. **VERIFICATION COMPLIANCE** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy #023. DOC 350.11 (20) A security procedure is in place to control and account for sharps, tools and utensils at all times. Documentation of daily control and inventory is maintained. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify):

Sight confirmation by inspector

Verbal confirmation by facility staff

Comments: Policy #023. Sharps, tools and utensils at the facility consist of Sharps are not available or utilized by inmate workers.